

CLAIM FOR JURY

JD-CL-53 Rev. 6-12
C.G.S. §§ 52-215, 52-258
Pr. Bk. §§ 14-4, 14-8, 14-10

STATE OF CONNECTICUT

SUPERIOR COURT

www.jud.ct.gov

Court Use Only

CLAIM6



Instructions

1. This claim must be accompanied by the appropriate jury fee (Section 52-258 of the Connecticut General Statutes).
2. When pleadings are closed, a Certificate of Closed Pleadings (JD-CV-11) must also be filed.

To: The Superior Court

Return date

Feb-03-2015

Docket number

FBT-CV-15-6048103

Name of case (Full name of Plaintiff v. Full name of Defendant)

SOTO, DONNA L., ADM OF THE ESTATE OF VICTORIA L. S Et Al v. BUSHMASTER FIREARMS INTERNATIONAL, LLC AKA FREED

<input checked="" type="checkbox"/> Judicial District	<input type="checkbox"/> Housing Session	<input type="checkbox"/> Geographical Area number _____	Address of court (Number, street, town and zip code) 1061 MAIN STREET BRIDGEPORT, CT 06604
---	--	---	--

This case is claimed for the inventory of jury cases.

(A certificate of closed pleadings must be filed before the case named above can be placed on the inventory of jury cases.)

Claim filed by ("X" one)

☒ Plaintiff's Attorney ☐ Plaintiff ☐ Defendant's Attorney ☐ Defendant

Name of Law Firm, Attorney, or Self-Represented Party

KOSKOFF KOSKOFF & BIEDER PC

Mailing address (Number, street, town, state and zip code)

350 FAIRFIELD AVENUE BRIDGEPORT, CT 06604

Telephone number

203-336-4421

Certification

I certify that this claim is filed in accordance with section 52-215 of the Connecticut General Statutes and that a copy of this document was mailed or delivered electronically or non-electronically on (date) **Nov-13-2015** to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

Name and address of each party and attorney that copy was mailed or delivered to*

DISERIO MARTIN OCONNOR & CASTIGLIONI - 1 ATLANTIC STREET/STAMFORD, CT 06901
BERRY LAW LLC - 107 OLD WINDSOR ROAD/2ND FLOOR/BLOOMFIELD, CT 06002

For Court Use Only

Signed (Signature of filer)

► **410518**

Print or type name of person signing

JOSHUA KOSKOFF

Date signed

Nov-13-2015

Mailing address (Number, street, town, state and zip code)

350 FAIRFIELD AVE 5TH FLOOR BRIDGEPORT, CT 06604

Telephone number

203-336-4421

*If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to.

Continuation of JDCL53 Claim For Jury Form for FBT-CV-15-6048103-S

Submitted By KOSKOFF KOSKOFF & BIEDER PC (032250)

Certification of Service (Continued from JDCL53)

Name and Address at which service was made:

RENZULLI LAW FIRM LLP - 81 MAIN STREET/SUITE 508/WHITE PLAINS, NY 10601

******* End of Certification of Service *******